

### **Hip Core Decompression Post-op Instructions**

#### **Wound Care:**

- Maintain your operative dressing, loosen bandage if swelling of the foot or ankle occurs.
- It is normal for the hip to bleed and swell following surgery – if blood soaks onto the bandage, do not become alarmed – reinforce with additional dressing.
- Please maintain steri-strips in place.
- Remove surgical dressing on the second postoperative day and apply waterproof Band-Aids over incisions and change daily. Physical therapy may change your dressing prior to the second postoperative day.
- Keep surgical incisions clean and dry.
- You may shower after removing the first dressing by placing waterproof Band-Aids over incision areas.
- Do NOT immerse the operative leg until 14 days after surgery

#### **Icing:**

- Icing is very important for the first 5-7 days after surgery.
- Use ice machine continuously or ice packs every 2 hours for 20 minutes daily until your first postoperative visit.
- Do not place the ice bag or cooling device directly on the skin. Care must be taken to avoid frostbite to the skin

#### **Activity:**

- You should restrict your weight bearing to toe touch or heel touch weight bearing for the first 6 weeks. You must use crutches at all times.
- Elevate your operative leg to the level of your heart whenever possible. Do not place pillows behind your knees. Pillows can be placed under your foot and ankle.
- Start physical therapy within 1-3 days. Please take the attached physical therapy protocol with you to your first physical therapy appointment.

#### **Exercises:**

- Straight leg raises, quad sets, heel slides and ankle pumps should begin 24 hours after surgery. Physical therapy will instruct you how to perform these.
- Complete exercises 4 times daily until first visit. Your goal should be to obtain full extension and 90 degrees of flexion by the end of week 2. Medications
- Do not drive a car or operate heavy machinery while taking narcotics.
- You have been prescribed a narcotic (either Norco or Percocet) for pain control. This is to be used for a short time period.
- Take 1-2 tablets every 4-6 hours as needed
- Max of 12 pills per day
- Plan on using for 2-5 days, depending on the level of pain.
- Do not take additional Tylenol (Acetaminophen) while taking Percocet
- Common side effects include nausea, drowsiness and constipation.

- Take medication with food to decrease side effects. o Ibuprofen (600-800mg) may be taken in between the narcotic medication.
- You should take an aspirin (81mg) daily for 2 weeks. This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of the calf or ankle, please contact us.
- You should resume your normal medications for other conditions the day after surgery. You may not drive or operate heavy equipment while on narcotics. It is important not to drink while taking narcotic medication.

**Diet:**

- Resume normal diet as tolerated this evening. We have no specific diet restrictions after surgery, but extensive use of narcotics can lead to constipation. High fiber diets, lots of fluids and muscle activity can prevent this occurrence.
- The anesthetic drugs used during surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids. The only solids should be dry crackers or toast. If the nausea and vomiting become severe or you show signs of being dehydrated (lack of urination), please call.

**EMERGENCIES:**

- Contact Dr. Glomset or his nurse at 405-885-8195 or by email [ortho@jtglomsetmd.com](mailto:ortho@jtglomsetmd.com) if any of the following are present:
  - Difficulty breathing
  - Painful swelling or numbness
  - Unrelenting pain
  - Fever (over 101° – it is normal to have a low grade fever for the first day or two following surgery) or chills
  - Redness around incisions
  - Color of lower extremity
  - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
  - Excessive nausea/vomiting

\*\*If you have an emergency after office hours or on weekends, call (405) 272-8400 and you will be connected to our page service – they will contact Dr. Glomset or one of his partners if he is unavailable. Do NOT call the hospital or surgicenter.

\*\*If you have an emergency that requires immediate attention, proceed to the nearest emergency room or call 911